

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE APPLICATION OF:

APPLICANT : AMNERIS C. WATERS et al.

SERIAL NO. : Unassigned ART UNIT: Unassigned

FILED : Herewith EXAMINER: Unassigned

FOR : MEDICAL DEVICE TO REMOVE HUBS/ENDS OF INTRAVENOUS TUBING

ASSISTANT COMMISSIONER OF PATENTS
WASHINGTON, DC 20231

Sir:

INFORMATION DISCLOSURE STATEMENT
35 U.S.C. 6; 37 C.F.R. 1.97; 1.98

Submitted herewith are copies of related art domestic patents, foreign patents and/or publications identified and discussed in the specification of the above identified application under the heading: "DESCRIPTION OF THE RELATED ART." These are identified on the attached PTO-1449 form.

The discussion of these related art patents and/or publications in the attached specification is believed to satisfy the duty to disclose requirements as set forth in the above identified statute and rules.

Respectfully submitted,



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RCL: vks

FORM PTO-1449 U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTY DOCKET NO. 22868.00	SERIAL NO.
INFORMATION DISCLOSURE CITATION IN AN APPLICATION		APPLICANT Amneris C. WATERS	
(Use several sheets if necessary)		FILING DATE	GROUP

U.S. PATENT DOCUMENTS

Examiner Initials	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE If appropriate
	3,233,313	07/1963	Roth			
	4,791,925	12/988	Mitterer			
	5,913,852	06/1999	Magram			
	6,077,280	06/2000	Fossum			

FOREIGN PATENT DOCUMENTS

	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation YES NO

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, etc.)

EXAMINER

DATE CONSIDERED

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.